

**TAX INVOICE**

**Switchmeds**

604, Suneja Tower-2, District Center,, Janakpuri, Delhi

Tel. : 9999428970 email : switchmeds@gmail.com

Drug Licence No. : DL-JNK-145663

**DL NO. DL-JNK-145663**

Invoice No. : 2561/2024-25	Vehicle No. :
Dated : 07-09-2024	Station :
Place of Supply : Delhi (07)	P.O No. : 126-092024-27389
Reverse Charge : N	P.O Date : 04-09-2024
GR/RR No. :	DRUG LIC NO :
Transport : .	

**Billed to :**  
 DCDC Health Services Private Limited  
 C-185, First Floor  
 Rewari Line Industrial Area  
 Mayapuri, Phase-II, Delhi, 110064  
 Party Mobile No :  
 GSTIN / UIN : 07AAFCD0204K1Z1  
 D.L. No. :

**Shipped to :**  
 DCDC Health Services Private Limited  
 CHC Ashwaraopet  
 CHC Aswaraopet DCDC Dialysis Centre  
 Govt Hospital Aswaraopet Bhadradi  
 Kothagudem Dist-507301  
 Party Mobile No : 8790607389  
 GSTIN / UIN : 07AAFCD0204K1Z1  
 D.L. No. :

S.N.	Description of Goods	HSN/SAC Cod	Qty.	Unit	Price	Amount( ` )
1	SODIUM HYPO 10% (5 LTR) VC2024/292	28289019	6.00	LTR	180.00	1,080.00
Add : CGST @ 9.00 %						97.20
Add : SGST @ 9.00 %						97.20
Add : Freight & Forwarding Charges						800.00
<b>Grand Total</b>					<b>6.00 LTR</b>	<b>2,074.40</b>


HSN/SAC	Tax Rate	Taxable Amt.	CGST Amt.	SGST Amt.	Total Tax
28289019	18%	1,080.00	97.20	97.20	194.40


**Rupees Two Thousand Seventy Four and Paisa Forty Only**

**Bank Details :** A/C NAME: SWITCH MEDS BANK NAME: AXIS BANK  
 A/C NO. 921020027370029 IFSC CODE: UTIB0001102

**Terms & Conditions**  
 E.& O.E.  
 1. Goods once sold will not be taken back.  
 2. Interest @ 18% p.a. will be charged if the payment is not made with in the stipulated time.  
 3. Subject to 'Delhi' Jurisdiction only.

Receiver's Signature :



**for Switchmeds**  
  
**Authorised Signatory**

Stock/No. of Boxes Received ..... 3  
 Subject to Physical Check  
 Name/Employee Code ..... K. Praveen  
 Centre Name ..... Ashwaraopet  
 Date/Time ..... 17/09/24  
 Signature ..... M. No. 70915612491